



## CAHS Consumer Excellence Award

Sponsored by HESTA

### Have you received outstanding service from our staff?

(Please print out – this is not an electronic form)

### Do you want to say thank you for a job well done?

The Child and Adolescent Health Service invites patients, families and clients to nominate staff members or teams for customer service recognition.

### What made the customer service outstanding?

Tell us why the staff member or team deserve to be recognised.

### To nominate a staff member please complete the details below.

Nomination forms are also available online at [www.cahs.wa.gov.au/general/consumerexcellence](http://www.cahs.wa.gov.au/general/consumerexcellence)

Name of the staff member or team you are nominating: \_\_\_\_\_

What Unit/Department/Region do they work in: \_\_\_\_\_

What date/s did the staff member/team care for you, your child or family: \_\_\_\_\_

Why you are nominating this person/team:

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Your name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

I give consent for CAHS Communications to disclose the details of my nomination to the staff member/team I have nominated: (Please circle)    Yes    No

Thank you for taking the time to nominate. Please place this form in the nomination box or give it to the appropriate staff member. Alternatively, please scan and email this form to [CAHS.Comms@health.wa.gov.au](mailto:CAHS.Comms@health.wa.gov.au) or post to CAHS Communications, Child and Adolescent Health Service, GPO Box D184 Perth WA 6840.